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## ENTRY BLANK

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PLEASE TYPE OR PRINT

☒ Entered previous May Show

☒ Ms.

☐ Mr. Artist

*Madeline Ruth Carothers*

(Last Name Last)

Permanent

Address

*2671 Ashley Road, Shaker Hts,*  
Street *44122, Ohio* City

Tel. ( ) *932-5100*

Zip

Area Code

Temporary

Address

Street

City

Tel. ( )

Zip

Area Code

Permanent address is in what county? \_\_\_\_\_

Born in Cuyahoga County ☐ Yes ☒ No

Collaborator \_\_\_\_\_

(If Any)

If entries are not accepted or not sold:

☒ Artist will pick up entries at Museum.

☐ Museum should dispose of entries.

☐ Museum should ship entries to artist C.O.D. at this address:

\_\_\_\_\_  
The attached card at right will be returned to you as notification of acceptance or rejection by the last week in April.

**THE RETURNED CARD IS YOUR ONLY RECEIPT TO CLAIM YOUR ENTRIES. Do not lose it.**

This entry blank must be fully made out and signed. Unsigned entry blanks will not be accepted.

Note carefully calendar for delivery and return of objects. It is understood that the Museum will have the right to dispose for its own account any entry not called for by the dates listed.

It is also understood that accepted entries will remain on exhibition until June 9, 1974.

The submission of entries will be construed as acceptance of all conditions printed in the entry information.

Signature

*Madeline R Carothers*



# ENTRY BLANKS

1

- ☐ 1. Paintings
 ☐ 2. Graphics
 ☐ 3. Photography  
☐ 4. Sculpture
 ☐ 5. Electric
 ☒ 6. Crafts

Medium or Materials

*Enamel on copper footed bowl*

Title

*"Ariadne's Wizardry"*

Price or NFS

Insurance Value  
If NFS Only

Size

*\$35.00*

*8" round*

## GRAPHICS AND PHOTOGRAPHY ONLY

Additional No. For Sale

Total No. in Edition

Price of Frame

DO NOT WRITE IN THIS SECTION

*7 (E, G)*

ACCEPTED

REJECTED

*X*

FEE PAID

BY

*3/18/74*

*JJ*

2

- ☐ 1. Paintings
 ☐ 2. Graphics
 ☐ 3. Photography  
☐ 4. Sculpture
 ☐ 5. Electric
 ☒ 6. Crafts

Medium or Materials

*Fine silver, cloisonne, and enamel*

Title

*salts and spoons.*

*One pair silver, cloisonne & enamel*

Price or NFS

Insurance Value  
If NFS Only

Size

*N.F.S.*

*\$50.00*

*each salt 1 1/4"*  
*each spoon 1 1/2"*

## GRAPHICS AND PHOTOGRAPHY ONLY

Additional No. For Sale

Total No. in Edition

Price of Frame

DO NOT WRITE IN THIS SECTION

*8 (E-G)*

ACCEPTED

REJECTED

*X*

RECEIVED

BY

*3/18/74*

*OR*



DO NOT DETACH

1974 MAY SHOW

The Cleveland Museum of Art

Cleveland, Ohio 44106

*Please keep address within this box for window envelope.*

Name	Madeline Ruth Carothers,	
Address	2671 Ashley Road	
City & State	Shaker Hts	Zip 44122

Ohio

PLEASE TYPE OR PRINT.

This is the label that will be used to mail your notification of acceptance or rejection.



## ACCEPTANCE OR REJECTION NOTICE

This is your only receipt to claim your object(s). This notification will be mailed to you following judging.

DO NOT DETACH



1

- ☐ 1. Paintings ☐ 2. Graphics ☐ 3. Photography  
☐ 4. Sculpture ☐ 5. Electric ☒ 6. Crafts

Medium or Materials

*Enamel on copper footed bowl*

Title

*"Ariadne's Wizardry"*

DO NOT WRITE IN THIS SECTION

7 (E.G.)

ACCEPTED

X

REJECTED

*Rec'd  
6/20/74*

*Madeline B. Carothers*

DO NOT DETACH



2

- ☐ 1. Paintings ☐ 2. Graphics ☐ 3. Photography  
☐ 4. Sculpture ☐ 5. Electric ☒ 6. Crafts

Medium or Materials

*Fine silver, cloisonne and enamel*

Title

*Fine silver, cloisonne and enamel  
salts and spoons (one pair)*

DO NOT WRITE IN THIS SECTION

8 (E.G.)

ACCEPTED

X

REJECTED